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DECLARATION AND POWER OF ATTORNEY PATENT APPLICATION	ATTORNEY'S DOCKET NO. 13702
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As below named inventor, I hereby declare that:

My residence, post office address and citizenship is as stated below next to my name.

I verily believe I am the original, first and sole or joint inventor (if plural, inventors are named below) of the invention entitled:

Apparatuses and Methods for Surgical Navigation			
the specifications and drawings of	of which		
(check one)	₩ is filed herewith.		
	was filed on Application Serial No. was amended on (if applicable)	as 	
I hereby state that I have review	wed and understood the contents of the above	identified	

specification and drawings, including the claims.

I acknowledge the duty to disclose information which is known to be material to the examination of this application to the Patent Office in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby state that I do not know and do not believe that the invention which is the content of the above specification, claims and drawings was ever known or used in the United States of America before my invention thereof, or the patented or described in any printed publication in any country before my invention thereof or more than one (1) year prior to this application, that the same was not in public use or on sale in the United States of America more than one (1) year prior to this application, that the invention has not been patented or made the subject of the inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve (12) months prior to this application; and as to applications for patents or inventor's certificate on the invention filed in any country foreign to the United States of America prior to this application by me or my legal representative or assigns.

- no such applications have been filed, or
- such applications have been filed as follows:

COUNTRY CLAIMED	APPLICATION NO.	DATE OF FILING (DAY, MO., YR.)	DATE OF ISSUE (DAY, MO., YR.)	PRIORITY UNDER 35 USC 119	
				YES NO D	
				YES D NO D	
ALL FOREIGN APPLICATIONS, IF ANY, FILED MORE THAN 12 MONTHS PRIOR TO THIS APPLICATION					
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) listed below to prosecute this application and transact all business in the Fatent and Trademark Office connected therewith.

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from ______ as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the person's from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
200 - 86-13 Date	2001-06-(3	DATE